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CONFIRMATION NO. 1588

<b>SERIAL NUMBER</b> 10/735,514	<b>FILING OR 371(c) DATE</b> 12/11/2003 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1623	<b>ATTORNEY DOCKET NO.</b> 03939/100M269-US1	
<b>APPLICANTS</b> Daniel A. Moros, Larchmont, NY; <b>** CONTINUING DATA *****</b> This appln claims benefit of 60/432,470 12/11/2002 <b>** FOREIGN APPLICATIONS *****</b>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 03/24/2004</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>E. J. O. M.</i> Allowance Examiner's Signature <i>ESO</i> Initials		<b>STATE OR COUNTRY</b> NY	<b>SHEETS DRAWING</b> 2	<b>TOTAL CLAIMS</b> 60	<b>INDEPENDENT CLAIMS</b> 13
<b>ADDRESS</b> 35159					
<b>TITLE</b> Method of treating movement disorders using barbituric acid derivatives					
<b>FILING FEE RECEIVED</b> 2480	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		